EXHIBIT 7



Ronald E. Richter Commissioner

April 16, 2012

Donald Brosen
Deputy Commissioner
Division of Administration

Ms. Dawn Littlejohn 253 West 122nd Street New York, N.Y. 10027

Janet D. Subrizi Assistant Commissioner Office of Personnel Services

Dear Ms. Littlejohn:

150 William Street, 16th Floor New York, N.Y. 10038 This letter is to acknowledge receipt of your Transfer Request Form (ACS-300) by the Administration for Children's Services Transfer Unit. Please be aware that the submission of Form ACS-300 does not represent a guarantee of your request.

212-341-2501 tel. 212-341-2504 fax

We have recorded your requested assignment (s) as follows:

Family Support Services - Office of Community Partnership and Advocacy

Your request will remain on file until a vacancy becomes available or for one year. If you wish to withdraw your request, please complete and sign the bottom portion of this form and forward to: Administration for Children's Services, Personnel Transfer Unit, 150 William St. 16th Floor, New York, NY 10038. Attention: Ms. Doris Cochran. You may also send an e-mail to Ms. Cochran to rescind your request.

Sincerely,





ACS/PERSONNEL SVCS.

Children's Services

Revised 2/2012 APR 13 PM 3: 2 REQUEST FOR TRANSFER

Submit your request to the Office of Personnel Services Transfer Unit at 150 William Street, 16th Floor, New York, N.Y. 10038. All transfer requests received by Personnel Services will remain on file until the transfer is completed or one year from the date of submission. You may also fax your transfer documents to 212-341-2500.

This request is for: [Transfer Shift Chang	ge [Transfer and	i Shift Change
EMPLOYEE INFORMA	TION: Please print legibly.		
Last Name:	First Name:	M.I.	Gender: (/) Ms. () Mr.
Employee ID #:	Dawn	£	
<u> </u>	Current Title/Level: Harminis house Styl Arolyst (NM)		
Home Address: 253 Wes	+ 122rd Street	0.	<i>y</i> C
City:	State:	Zip: /ひりと Alternate P	27
Home Phone #	Office Phone #	Alternate P	hone #
(97F) 4 FS -1370	(212)34-255	ა ()	
CURRENT ASSIGNMEN	vr.		
75. 1.1. 75		Unit/Facility:	
Division/Program: Administro for Employment Services Distribution Point:		Work Location Address and Borough:	
Distribution Point:		Work Location Address and Borough:	
M50 AD	m2/Adminutrahede	150William	Sheet, 16H H 11, MY
Current Work Schedule/Tour:		Days Off/Pass Days:	
REQUEST FOR TRANS	FER TO:		
rly CGA Division/Program 1449 OCP		Work Location Address and Borough	
I ICC / Deline	+21.1 H	150 Lillian Of	ont 11th How Kin 11. 41
1. 1 3 3 7 0 1 1 Re 1 C W	marcily Contributing of 19000	· myla	cet, 11th floor Km 11. HI
2.			
3.			
	The state of the s		
4.			
5.			
SHIFT CHANGE:			
What Work Schedule/Tour are you requesting?		What Days Off/Pass Days are you requesting?	
	N/a		
· · · · · · · · · · · · · · · · · · ·			7//12/12